## Best Available Copy

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09619450

CLAIMS AS FILED - PART I (Column 1)						(Column 2)		SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			16					RATE	≫FEE••	- 1. i	*RATE	FEE!	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			(() minus 20=		*			X\$ 9=		OR	X\$18=	1	
INDEPENDENT CLAIMS			₩ minus 3 =		•			X40=		OR	X80=	80	
MULTIPLE DEPENDENT CLAIM PI			RESENT		-		<b>.</b>				<b>P</b>		
* If the difference in column 1 is less than zero, enter "0" in column 2								+135=		OR	+270=		
CLAIMS AS AMENDED - PART II								TOTAL		OR	TOTAL		
<u>.</u>		(Column 1)	MENDED	(Column 2) (Column 3)			<u>.</u>	SMALL	ENTITY	ОR	SMALL		
MENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIC PAID	BER DUSLY	PRESENT EXTRA	RATE	RATE	ADDI- TIONAL LEE	1.1	HATE)	ADDI- TIONAL FEE	
	Total	•	Minus	**		= .		X\$ 9=		ΘR	χ̂\$:18≡		
	Independent	*	Minus	***		=	7	∕X40= /-			*X80=		
Z.	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1 2 3 1 1 4 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		OR •			
								+135≦ TOTAL ADDIT. FEE		OR OR	#4270= TOTAL ADDIT FEE		
		(Column 1)		(Colur		(Column 3)	•				e Mario ka		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO	BER	PRESENT EXTRA		RATE	ADDI:∱ TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	•	Minus	**		=		X\$ 9=	1.34	ं.∻ OR	X\$18=		
ME	Independent	•	Minus	***	-	=		- X40= ∗r	TITATO	CE	}⊮X80=		
L	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		┛	+135=	17 mes	OR	+270=		
	-							TOTAL ADDIT. FEE		OR	TOTAL		
		L <u>-</u> -			N X								
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		1		X\$ 9=	्यत् शृक्षणकांकाते	OR"	∴X\$18=±	· 阿里尔基尔	
	Independent	*	Minus	***		=		X40=		ÓR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							.105					
		mn 1 is less than ti						+135= TOTAL		OR	+270=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE													
		nber Previously Pa					er fou	und in the app	propriate box	k in col	lumn 1.		